PTO/SB/22 (08-03)
Approved for use through 7/31/2006, OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARMENT OF COMMERCE

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PET	TITION FOR	EXT	ENSION OF TIME UND	ER 37 CFR 1.136(a)	Do	exet Number (O	PDC 119				
				In re Application of Solomon S. Steiner et al.							
				Application Number 09/766,362 Filed January 19, 200							
				For Dry Powder Formulations of Antihistamine for Nasal							
				Art Unit 1615	Examiner H	Humera N. Sheikh					
	This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.										
The requested extension and appropriate non-small-entity fee are as follows (check time period desired):											
	© One month (37 CFR 1.17(a)(1)) \$ 110.00										
	Two months (37 CFR 1.17(a)(2))										
	☐ Thre	e mo	onths (37 CFR 1.17(a)(3))					s			
	Four months (37 CFR 1.17(a)(4))										
	☐ Five	mon	ths (37 CFR 1.17(a)(5))					\$			
×	Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$55.00										
	A check in the amount of the fee is enclosed.										
	Payment by credit card. Form PTO-2038 is attached.										
	The Director has already been authorized to charge fees in this application to a Deposit Account.										
X	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-1868										
	I have enclosed a duplicate copy of this sheet.										
	I am the		applicant/inventor.								
	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/98).										
		X	attorney or agent of rec	cord. Registration Number	er _	31,284	•				
	attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a).										
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2018.											
	April 12, 2004										
		<u>·</u>	Date		1	Signal	ure				
			104) 817-8473	<u></u>	/						
Telephone Number Typed or printed name											
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their reprosentative(s) are required. Submit multiple forms if more than one signature is required, see below.											
	Total of		* • •	ns are submitted.			-				

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, cell 1-800-PTO-9199 and select option 2.

PTO/SB/17 (10-03)
Approved for use through 07/S1/2006. OMB 0651-0032

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		Complete if Known								
FEE TRANSMITTAI	L	Application Number				09/766,362				
for FY 2004		Filing Date		_	January 19, 2001					
		First Named Inventor Solomon S. Steiner et a			et al.					
Effective 10/01/2003. Patent fees are subject to annual revision.		Examiner Name H			Hu	Humera N. Shikh				
Applicant claims small entity status. See 37 CFR 1.27		Art Unil			16	1615				
TOTAL AMOUNT OF PAYMENT (\$) 55.00		Attomey Docket No. PDC 119						<u> </u>		
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)									
Check Credit card Money Other None	3. ADDITIONAL FEES									
Deposit Account:	Large Entity , Small Entity									
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Name The Director Is authorized to: (check of that apply)	1053	130	1053 1812 2,		Non-Engilsh For filing a d			examination		
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SUBMITTED BY			4 41				emplete (d ap			
Name (Print/Type) Patrea L., Pabst		Registri (Attorne)	etion No. √Aoenti	3	1,284	Те	ephone (4	04) 817-8		
Signature	_				Dá	10	April 12	2, 2004		

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